PTO/SBANIIZAN

Approved for use through 1/3 17000 CMB ON -0032 Under the Paperwork Reduction Act of 1895, no principle and required to respond to a politicition of information under I displayed a visit CMB control number. U.S. Peters and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Application or Docked Number 10/090, 390 Substitute for Form Pto-878 Bliechie December 6, 2004 APPLICATION AS FILED - PARTI. (Column 1) OTHER THAN · (Cainin 2) SMALL ENTITY OR SMALL ENTITY FOR HUMBER FILED HUMBER EXTRA BASIC FEE RATE (\$ FEE (1) RATE (4) 37 CFR 1 1641 (6) # (6) NA PÉC(1) H/A HVA 150.00 SEARCHFEE NIA 300.00 (37 CFR | 16(N. 14, 04 174) N/A . N/A NA \$250 E XXXIINATION FEE NIA \$600 : NA (37 CFR 1 1010) (p) or [a)] N/A NA \$100 TOTAL CLAIMS NA \$200 (37.CFR 1 16(0) AUNU4 20 . X\$ 28 INDEPENDENT CLAIMS X\$50 ÓŘ X100 # C tunim X200 OOI beecke agniwand and drawinges exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR | 16(4)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1,16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR I 1641) +160= 4360m If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Columna) (Column i) OTHER THAN (Column 3): OR SMALL ENTITY CLAIMS HIGHEST ENTITY REMAINING MUMBER PRESENT RATE (1) 2406 AFTER MENDMENT ADDI-PREVIOUSLY EXTRA RATE(\$) A001: TIONAL PAID FOR FEE (1) pi cra Liggi MONAL Minus C ENDE 6 FEE (1) X\$ 25 X\$50 Mapendent . OR Minus . X100 X200 Application Size Fee (37 CFR 1.16(s)) Oft first presentation of multiple dependent claim **+180**≈ +360= OR TOTAL TOTAL ADD'L FEE **OR** ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS REMAINING HIGHEST NUMBER Œ PRESENT RATE (1) ADDI-AFTER. RATE (\$) PREVIOUSLY PAID FOR EXTRA ADOI-TIONAL FEE (4) TIONAL Total-FEE (1) Mirius MONDA X\$ 25 X\$50 thorpendent . OR Minue \*\*\*... X100 X200. Application 51x4 F40 (37 OFR 1.16(8)) OR. furt presentation of multiple dependent claim at CFA 1.160) +180= +860± OR. TOTAL' If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

If the Highest Number Previously Paid For" IN THIS SPACE is less than 30, enter "20".

If the Highest Number Previously Paid For" IN THIS SPACE is less than 30, enter "20".

The Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".

The Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".

It the Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".

It the Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".

It the Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".

It is the Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".

It is chiefled in the pour in the Formation Confidentially is potentially in the Individual Confidentially in the Individual Confidential Complete in Individual Confidential Complete in Individual Confidential Complete in Individual Confidential C TOTAL ADD'L FEE OR